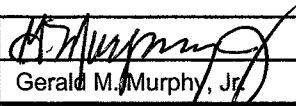


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

| | | | |
|--|--|----------------------------|--|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3> | | Complete if Known | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number | |
| | | 10/695,744-Conf. #7652 | |
| | | Filing Date | |
| | | October 30, 2003 | |
| | | First Named Inventor | |
| | | Patrizia PATERLINI-BRECHOT | |
| Examiner Name | | C. J. Myers | |
| Art Unit | | 1634 | |
| Attorney Docket No. | | 2121-0178P | |
| TOTAL AMOUNT OF PAYMENT | | (\$) 200.00 | |

| | |
|--|--|
| METHOD OF PAYMENT (check all that apply) | |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ | |
| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u> | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments | |

| FEE CALCULATION | | | | | | | |
|---|---------------|--|--------------------------------------|-----------------------|------------------|---------------------------|----------------|
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | _____ |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | _____ |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | _____ |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | _____ |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | _____ |
| 2. EXCESS CLAIM FEES | | | | | | | |
| Fee Description | Fee (\$) | Small Entity Fee (\$) | | | | | |
| Each claim over 20 (including Reissues) | 52 | 26 | | | | | |
| Each independent claim over 3 (including Reissues) | 220 | 110 | | | | | |
| Multiple dependent claims | 390 | 195 | | | | | |
| Total Claims | 34 | - 34 or HP | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | |
| | x | = | | | | Fee (\$) | Fee Paid (\$) |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | |
| Indep. Claims | 2 | - 6 or HP | Extra Claims | Fee (\$) | Fee Paid (\$) | | |
| | x | = | | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | | | |
| _____ | - 100 = _____ | /50 = _____ | (round up to a whole number) x _____ | = | | | |
| 4. OTHER FEE(S) | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1455 Filing an application for patent term adjustment | | | | 200.00 | | | |

| | | | |
|---------------------|---|-----------------------------------|----------------|
| SUBMITTED BY | | | |
| Signature |  | Registration No. (Attorney/Agent) | 28,977 |
| Name (Print/Type) | Gerald M. Murphy, Jr. | Telephone | (703) 205-8000 |
| | | Date | MAR 25 2010 |